

00862.021893



PATENT APPLICATION

D.J.
#12 616-02
[Signature]

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
HIROSHI SATOMI ET AL.) Examiner: N. Mehrpour
Application No.: 09/547,398) Group Art Unit: 2685
Filed: April 11, 2000)
For: PORTABLE TERMINAL)
APPARATUS AND)
TERMINAL APPARATUS) May 28, 2002

Commissioner for Patents
Washington, D.C. 20231

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MAY 31 2002
Technology Center 2600

SECOND SUPPLEMENTAL PRELIMINARY AMENDMENT

Sir:

Prior to examination on the merits, and supplemental to the Preliminary Amendments filed on September 21, 2000, and September 27, 2001, please amend the above-identified application as follows:

IN THE CLAIMS:

[Please cancel Claims ~~6-13~~, ~~21~~, ~~23~~, ~~25~~, and ~~27~~ without prejudice or disclaimer of the subject matter presented therein.]

[Please amend Claim ~~14~~, ~~22~~, ~~24~~, ~~26~~, and ~~28~~ to read as follows. A marked-up version of the amended claims, showing the changes made thereto, is attached.]

14. (Twice Amended) A portable terminal apparatus comprising:

[Handwritten signature/initials]

2685



In re Application of:

HIROSHI SATOMI ET AL.

Application No.: 09/547,398

Filed: April 11, 2000

For: PORTABLE TERMINAL APPARATUS AND
TERMINAL APPARATUS

Docket No. 00862.021893

Examiner: N. Mehrpour

Group Art Unit: 2685

Date: May 28, 2002

COMMISSIONER FOR PATENTS
Washington, D.C. 20231

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

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CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 9	MINUS	** 21	= 0	x \$9 \$18	\$0.00
INDEP. CLAIMS	* 5	MINUS	*** 10	= 0	x \$40 \$80	\$0.00
Fee for Multiple Dependent claims \$140°/\$280						\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$0.00

- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.

☐ A check in the amount of \$____ is enclosed.

☐ Charge \$____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

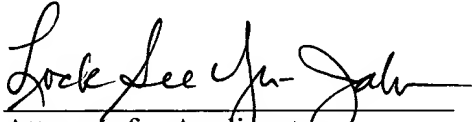
☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.

☐ A check in the amount of \$____ to cover the fee for a ____-month extension is enclosed.

☐ A check in the amount of \$____ to cover the Information Disclosure Statement fee is enclosed.

☒ Applicants' undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,


Attorney for Applicants
LOCK SEE YU-JAHNES
Registration No. 38,667

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